

# CLAIMS ONLY

SERIAL NO.

APPLICANT(S)

FILING DATE

## CLAIMS

AS FILED

AFTER  
1st AMENDMENT

AFTER  
2nd AMENDMENT

IND.

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| 50           |    |   |  |  |  |
| TOTAL IND.   | 7  |   |  |  |  |
| TOTAL DEP.   | 10 |   |  |  |  |
| TOTAL CLAIMS | 17 |   |  |  |  |

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| 99           |  |  |  |  |  |
| 100          |  |  |  |  |  |
| TOTAL IND.   |  |  |  |  |  |
| TOTAL DEP.   |  |  |  |  |  |
| TOTAL CLAIMS |  |  |  |  |  |

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS